

Name : _____

Score : _____

Teacher : _____

Date : _____

Complete the Number Series

____, ____, ____, -35, -34, ____, -32, ____

____, -39, ____, -37, -36, ____, ____, ____

____, -76, ____, ____, ____, -72, ____, -70

____, -38, ____, ____, ____, -34, ____, -32

____, ____, -5, ____, -3, -2, ____, ____

____, ____, -6, -5, ____, ____, ____, -1

____, ____, ____, -87, -86, ____, ____, -83

-99, ____, ____, ____, -95, ____, ____, -92

____, -96, ____, ____, ____, -92, ____, -90

____, -71, -70, ____, ____, ____, ____, -65

